

# Orcas

Features & Technology  
Portal – Data Management  
Planned Future Direction  
Chart2Go



**Accu-Med Services**  
An **Omnicare** Company

# Product and Industry Directions

- Accu-Med is a key participant in the movement toward a national Electronic Health Record
  - Members of NCPDP LTC workgroup for electronic prescribing standards
  - Members of HL7 LTC workgroup for defining national EHR standards
  - Members of NASL Long Term Living Workgroup advising the Office of the National Coordinator of Health Information Technology on LTC issues
  - Members of AHIMA, AHCA, AAHSA, NASL, ASCP



**Accu-Med Services**  
An **Omnicare** Company

# About Accu-Med Services

- Established in 1984
- Acquired by Omnicare in 1996
- Nation's Leading Provider of Information Systems for Long-Term Care
- Business with 5,100 Nursing Homes and Assisted Living Facilities, Therapy Organizations Nationwide
- Largest provider of institutional pharmacy services to long term care serving more than 1.4 million residents in 47 states
- One of the largest clinical research organizations in the world with a focus on pharmaceuticals and geriatric care
- Largest software provider in Long Term Care
- NYSE:OCR
- Fortune 500 company



**Accu-Med Services**  
An Omnicare Company



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An **Omnicare** Company

# Suite of Interactive Products



**Orcas**<sup>TM</sup>  
Clinical / Financial Suite



**Accu-Care**<sup>TM</sup>  
Clinical Software



**Cypress**<sup>TM</sup>  
Therapy Management



**Chart2Go**<sup>TM</sup>  
Portable Electronic Charting



**Pro-Tracking**<sup>TM</sup>  
Clinical Outcomes Management



**Vicura**<sup>TM</sup>  
Medication Management



**Add-On**<sup>TM</sup>  
Financial Software



**Omniview**<sup>TM</sup>

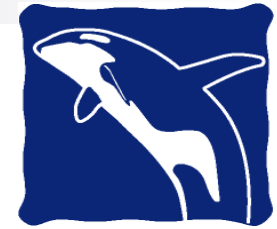


# Features

- Integrated suite with billing and AR modules
- Unique workflow designed for clinicians
- Remembers who you are, what you do and where you are
- Everything you need is a click or two away
- Multi-facility design with corporate controls
- Portal management tools
- Fully supported
- Hosted deployment



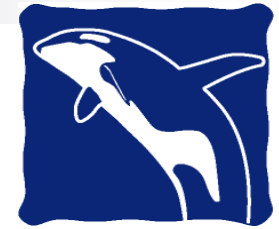
# System and Process Reminders



- Workflow Management tools
  - ☐ Log-on and instantly view tasks that require completion
- Message Board
- Task Reminders
  - ☐ Clinical process
  - ☐ AR processes
  - ☐ System requirements

Notices 03/03/2005		
(add new row)		
To Do List		
Show <u>All</u> tasks		
	Goal review date for Sapp, C.	3/15
!	Complete care plan for Brow...	2/22
	Complete care plan for Carls...	3/16
	Complete care plan for Doe, J.	3/05
	Comprehensive care plan rev...	4/12
	Unposted Physician Order for...	3/01
!	Incomplete Physician Order f...	2/24
<input type="checkbox"/>	Review Current Orders for Sa...	3/07
!	<input type="checkbox"/> Review Current Orders for Fr...	3/01
	Admission MDS for Donald F...	3/03
	Schedule MDS for Franks, D.	3/04
	1st Quarterly MDS for Charle...	3/16
<input type="checkbox"/>	MDS discharge tracking for B...	3/06
	None of above - Medicare 14 ...	3/14
	Complete MDS for Jane Doe	3/14
	Late fee for December	3/25
	Provider Setup for Langston, K.	2/23
	Recalculate charges	3/22
	Refund trust balance for	3/22
	Primary physician for Brown...	2/27
<input type="checkbox"/>	Close Resident Trust	3/12
<input type="checkbox"/>	Send Trust Statements	3/16
!	Personal info for Alongcame...	2/17
	Pending admit for Wheeler, S.	3/03
	Referral for Gresham, J.	3/03
	Benefit exhausting for Averylo...	3/11
	Pending admit for Nyberg, M.	2/27
	Ancillary batch #1 for 02/18/05	2/18
<input type="checkbox"/>	Close Resident Trust	3/17
<input type="checkbox"/>	Send Trust Statements	3/06
	Benefit exhausting for Sapp, ...	2/12

# Built in Search Engine



- Pre-Defined “Show” statements to instantly view outcomes and track activities before they are delinquent...

- ☐ Clinical Status

- MDS completion states
- Expired Care Plan dates
- Unsigned Physician Orders
- And more

- ☐ Billing

- AR Balances
- Ancillary Limits
- Financial Accounts
- And more

One  
click

Orcas: Sue Lewis - Waldron Health Care 9/20/2007

Finder | Planner

Back Forward Reports Print Admit Clinical Financial Setup Internet Assistance Facility

Face Sheet Chart Account Census Resident Trust Policy

**Margaret L. DeBoer** 05W0011-1 107-D  
Private (C-PR, MB, MA)  
Readmitted 10/25/2006 Emergency contact: Carl T. DeBoer (366) 660-5566  
DNR Allergies: NKA Physician: Dr. Mark M. Lacinder (360) 299-8877

Nursing Alerts:

Show Medicare RUG scores.

Date	Assessment	Medicare RUG	Status	...
01/16/2006	Admission	CA109	Complete	3...
04/11/2006	1st quarterly	CA109	Complete	3...
07/08/2006	2nd quarterly	CA109	Complete	3...
10/03/2006	3rd quarterly	CA109	Complete	3...
10/22/2006	Discharged (return anticipated)		Complete	3...
10/25/2006	Reentry		Complete	3...
12/03/2006	Annual	CA109	Complete	3...
02/27/2007	1st quarterly	CA109	Complete	3...

(add new row)

Open drawer to inactivate/modify this assessment.

RAI AAAB CDEFGHIJKLMNOPQRW

# Orcas Clinical Features

- MDS
- Care Plans
- Physician Orders
- Progress Notes
- Prospect Management
- Weights
- Face Sheet Management





# Orcas - MDS

- Error, edit and audit checks
  - Auto –error checking for transmission requirements
  - Web edits for clinical consistency checks, DAVE I audit, MRR edits, RUG edits and more
- Color-coded visual cues
  - Section completeness
  - RAP/RUG/QI triggers
  - MDS errors

Face Sheet | **Chart** | Account | Census | Resident Trust | Policy

**Robert K Smith** [0000001-1](#) **102-2**  
 M Medicare A (PV)  
 Admitted 01/01/2003  
 CPR Allergies: NKA  
 Emergency contact: <no contact> <no phone>  
 Physician: Dr. Robert Thompson <no phone>

**MDS** Nursing Alerts:

Section **E. Mood and Behavior Patterns** **None of Above - Medicare 30 Day Assessment**

<b>E1.</b>	<b>INDICATORS OF DEPRESSION, ANXIETY, SAD MOOD</b>	<p>(Code for indicators observed in last 30 days, irrespective of the assumed cause)</p> <p><b>VERBAL EXPRESSIONS OF DISTRESS</b></p> <p>a. Resident made negative statements—e.g., "Nothing matters; Would rather be dead; What's the use; Regrets having lived so long; Let me die" ● <b>RAP</b> ● <b>RUG</b> ● <b>QI</b>  <u>0. Indicator not exhibited in last 30 days</u></p> <p>b. Repetitive questions—e.g., "Where do I go; What do I do?" ● <b>RAP</b> ● <b>RUG</b>  <u>0. Indicator not exhibited in last 30 days</u></p> <p>c. Repetitive verbalizations—e.g., calling out for help, ("God help me") ● <b>RAP</b> ● <b>RUG</b>  <u>0. Indicator not exhibited in last 30 days</u></p> <p>d. Persistent anger with self or others—e.g., easily annoyed, anger at placement in nursing home; anger at care received ● <b>RAP</b> ● <b>RUG</b>  <u>0. Indicator not exhibited in last 30 days</u></p> <p>e. Self deprecation—e.g., "I am nothing; I am of no use to anyone" ● <b>RAP</b> ● <b>RUG</b>  <u>0. Indicator not exhibited in last 30 days</u></p> <p>f. Expressions of what appear to be unrealistic fears—e.g., fear of being abandoned, left alone, being with others ● <b>RAP</b> ● <b>RUG</b>  <u>0. Indicator not exhibited in last 30 days</u></p> <p>g. Recurrent statements that something terrible is about to happen—e.g., believes he or she is about to die, have a heart attack ● <b>RAP</b> ● <b>RUG</b> ● <b>QI</b>  <u>0. Indicator not exhibited in last 30 days</u></p>
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RAI ☐ AA ☐ AB ☐ A ☐ B ☐ C ☐ D ☐ **E** ☐ G ☐ H ☐ I ☐ J ☐ K ☐ M ☐ N ☐ O ☐ P ☐ Q ☐ R ☐ T ☐ W ☒

# Orcas -RAPS

- Flexibility for your preferred clinical process
- Color coded visual cues
  - ☐ Completed data
  - ☐ Required
  - ☐ Portions in progress
- Automated RAI guidelines
- Electronically signed RAP notes
- Medical Spell checking
- Multiple notes per RAP or multiple RAPs per note

The screenshot displays the Orcas -RAPS software interface for a Resident Assessment Protocol (RAP) summary. The patient is Robert K Smith, ID 0000001-1, admitted 01/01/2003. The interface is divided into several sections:

- Top Navigation:** Includes buttons for Back, Forward, Reports, Print, and tabs for Face Sheet, Chart, Account, Census, Resident Trust, and Policy.
- Patient Information:** Displays patient name, ID, admission date, and emergency contact information.
- Section V: Resident Assessment Protocol Summary:** This is the main section, divided into two parts:
  - (a) Check If Triggered:** A list of 18 RAP problem areas with checkboxes. Items 1 through 10 are checked, indicating they have been assessed. Items 11 through 18 are unchecked, indicating they have not been assessed.
  - (b) Care Planning Decision Check If Addressed in Care Plan:** A list of 10 items with checkboxes. Items 1 through 10 are checked, indicating they have been addressed in the care plan.
- Admission Assessment:** A section for documenting the admission assessment, including a trigger statement and a list of guidelines.
- Selected RAPs:** A section for selecting specific RAPs to document. In this case, "2. Cognitive Loss / Dementia" is selected.
- Trigger Statement:** A text area for documenting the trigger for the selected RAP.
- Guidelines:** A list of guidelines for the selected RAP, with checkboxes for each item.
- Medical Factors:** A list of medical factors for the selected RAP, with checkboxes for each item.
- Note:** A text area for documenting the note.
- Signature:** A section for signing the note, with a dropdown menu for selecting the signer.
- Bottom Navigation:** Includes buttons for Previous Note, Next Note, Post This Note, Finish Later, and Cancel.

# Orcas – Care Plans



- Visual cues and reminders for Care conference Reviews or Outdated Goals
- Auto generates text for care plan statements
- Flexible Library
- Social Model of Care
- Unlimited problems
- Unlimited goals per problem
- View active information for any date

Face Sheet | **Chart** | Account | Census | Resident Trust | Policy

**Robert K Smith** 0000001-1 102-2  
 M Medicare A (PV)  
 Admitted 01/01/2003  
 CPR Allergies: NKA  
 Emergency contact: <no contact> <no phone>  
 Physician: Dr. Robert Thompson <no phone>

**Care Plan** Nursing Alerts:

Next review date: ... 06/20/2009

Show care plan as of 06/29/2009 for all disciplines and exclude resolved items. Generate

Long-term goal: ... will minimize decrease of current level of cognitive functioning, Increase communication skills and In...

Discharge plan: ... Remain in a long term care setting due to level of dependence in ADL's and level of disorientation inte...

Problems	Goals	Approaches
<b>1. 03/01/08</b> Edit Resolve <b>Cognition - Short Term Memory Loss</b> Resident has short term memory loss as manifested by inability to complete task(s) and inability to remember names of staff, other residents, family related to cardiovascular problem and respiratory problem.	<b>1. 03/01/08</b> Edit Resolve Resident will recall names, places and recent events as evidenced by able to remember information after five minutes and past events; does not continually repeat questions, able to remember the events of the day when asked and able to remember the name of places previously been before by 06/20/2009.	<b>1. 03/01/08</b> Edit Resolve 1:1 visits for sensory stimulation. Report and document resident response QS (qs). Every day (Nights,Days,Evenings). ACT, LN, SS  <b>2. 03/01/08</b> Edit Resolve 1:1 visits to establish a trust relationship. Allow resident to vent/discuss feelings of fear, anxiety and/or frustration. Be an active listener. Make supportive statements such as, "I understand" QS (qs). Every day (Nights,Days,Evenings). ACT, LN, SS  <b>3. 03/01/08</b> Edit Resolve Administer oxygen by nasal cannula, per physician(s) order(s),

# Orcas – Progress Notes



- Enter general notes
- Sort notes by column headers either ascending or descending
- Filter notes by:
  - ☐ Date Range
  - ☐ Author
- Auto generated notes:
  - ☐ MDS RAPs
- Incomplete notes may only be completed by note author
- Medical spell check
- To Do's generated for:
  - ☐ Completing an incomplete note
- Editing notes
  - ☐ Select Note to edit/reason why
  - ☐ System saves original note to DB and permits editing in note field
  - ☐ Date and time stamp of original posted note and editing

Face Sheet

Chart

Census

**Gerta D. Weissman** [0000027-1](#) **113-B**  
 F Private Payor  
 Admitted 09/14/2002 [Emergency contact:](#) Harry Weissman (402) 329-1082  
 CPR Allergies: NKA Physician: Dr. Bob Friedman (402) 834-2312

**Progress Notes** Nursing Alerts:

Show [notes entered by:](#) Rhonda Wilson for [selected dates](#) from 09/10/2003 thru 09/17/2003 [Generate](#)

Date ▲	Note Type ▼	Note ▼	Entered By ▼
09/10/03	Routine	This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status.	Rhonda Wilson RN
09/11/03	Incident	This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status.	Sally Nelson LPN
09/15/03	Routine	This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status.	Rhonda Wilson RN
09/16/03	Routine	This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status.	Rhonda Wilson RN
09/16/03	Routine	This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status. This is the text of the note Rhonda wrote about Gerta's current status.	Rhonda Wilson RN

[\(add new row\)](#)

Note date: 09/17/2003 Time: 9:43 am  
 Note type: [Routine](#)  
 Note:  
 Text for note

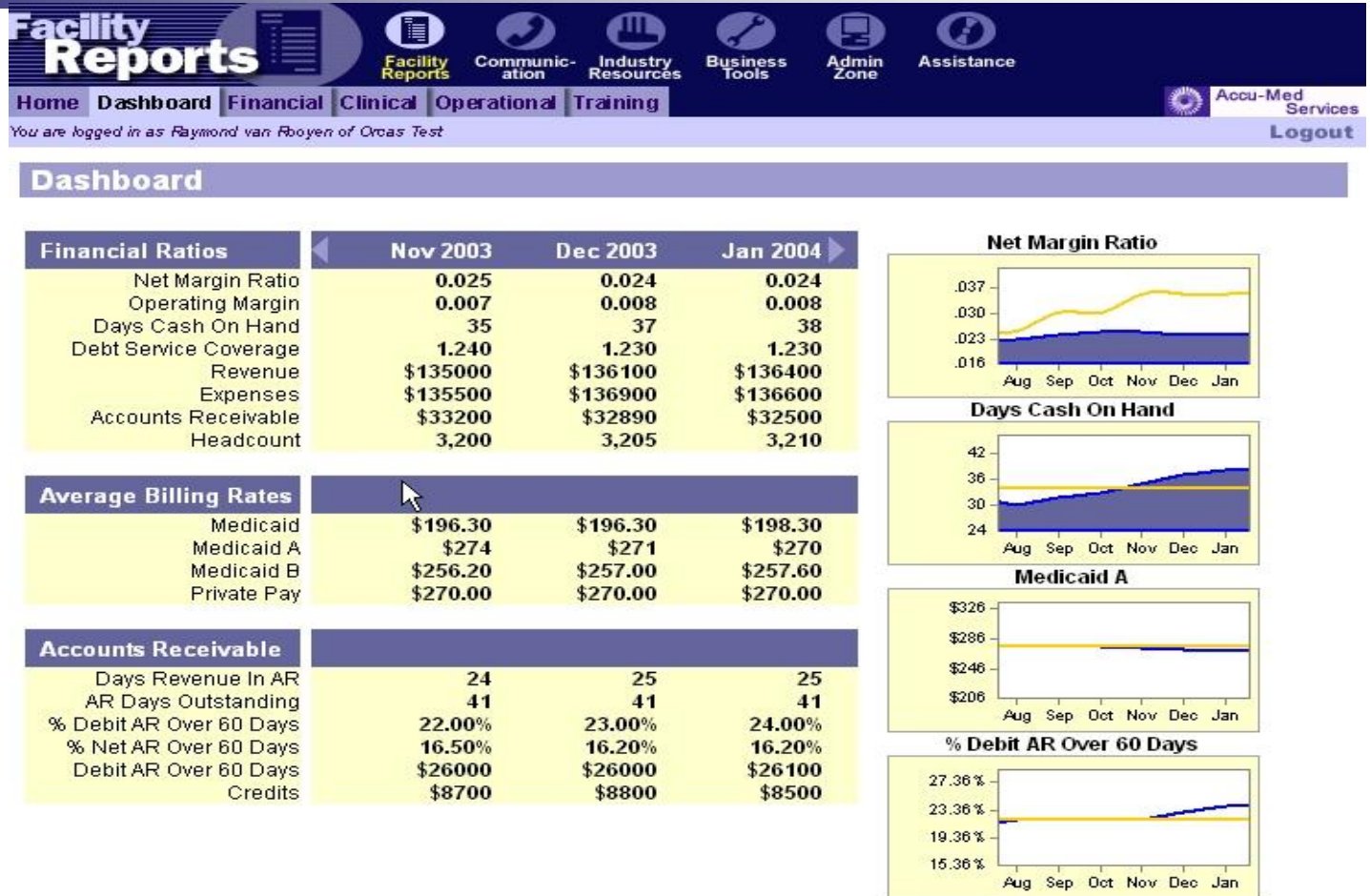
[Post This Note](#) [Finish Later](#) [Cancel](#) [Delete](#)

# Financial Features

- Census
- AR
- Electronic Billing
- Resident Trust
- GL Interfaces
- Billing imports

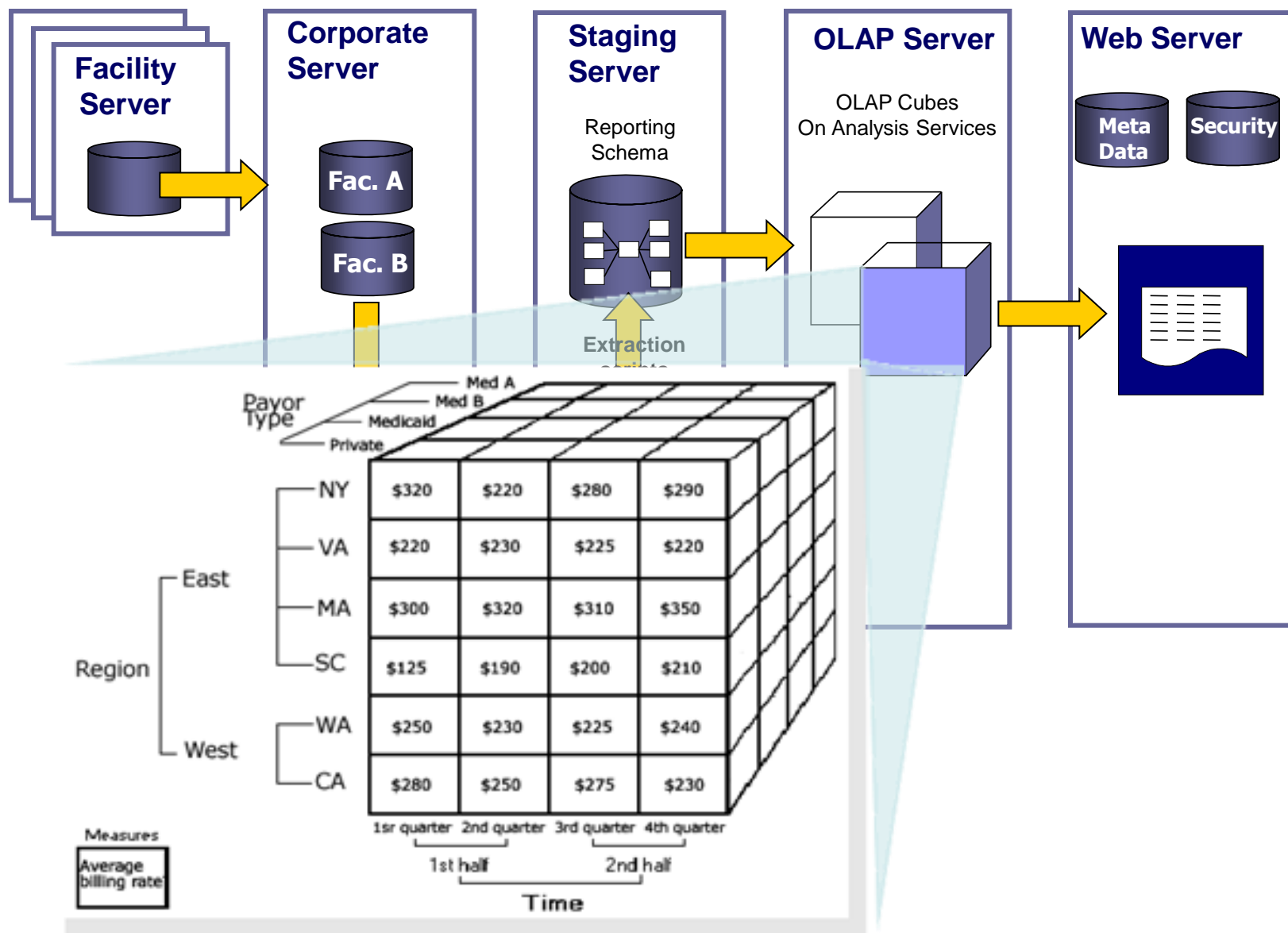


# Portal Dashboard



- Consolidated view of key business indicators
- Trending visible by scrolling months
- Level of aggregation changeable

# Portal Technology Overview





# Orcas Coming Attractions

## *Future Features*



- Chart2Go
- E-assessments
- Clinical Findings
- Infection Control
- Incident Management





# Orcas Census Board



- Quick visual cues
  - Occupied/Vacant beds
  - Care Levels
  - Gender
  - Medicare Payor
- Census summary
  - By location
  - Occupancy rates
  - Bed Holds

**Census Board** Show [all residents](#) as of: 5/4/2009

☐ = Certified   
 ☒ = Bed Hold   
 -Red = 2+ in one bed   
 ▾ = More data

101 -Carpenter •Taylor -Weissman	102 - - -	103 -Mandella -DeKlerk	104 -Cooper -Miller	105 -Ferrante -Hombach	106 -Chin, H -Chin, L
107 -Kipling -Clemens -	108 -Combro -Santiago	109 -Havel -Walesa -	110 -Schmidt -McClain -Wozinski	111 -Allen -St John -Lopez	112 -Lichnowsk -Bretano
113 •Johnson -Girlandaio	114 -Sanchez -Van der Ho -d'Arcy	115 -Rimsky -Korsakov	116 -Tolstoy -Dostoyevs -Chekov	117 -Blake	118 -Saint Saen -Stravinsky
119 -Schubert -Schumann	120 - -	121 •Hillary -Norgay -	122 -Reiersen -Catanach -Keuther	123 -Ciccone -Boone	124 -Haydn -Handel

**Patagonia Wing**

125 -Marshall -Dillon	126 -Walters -Gumm -Lee	127 -Joyce -Proust -	128 -Murray -Belush -Martin
131 -Manville -Osmund -Schidmore	132 -O'Reilly -Tutti	133 - - -	134 -Beethoven -Mozart, W
137 -Carbo -Gable	138 -Barrymore -Burke	139 -Amundson -Scott -Shackelton	140 -Little Light -Sanders
143 -Nelson, M -Nelson, A	144 -Bronte, A -Bronte, C -Bronte, E	145 -Schiller -Goethe	146 -Smith -Smythe
		147 -Austen -Thackery	148 -Dunsmore -Akers

**Room 122**

- A- Reiersen, Astrid (MA)
- B- Catanach, Mathilde (MA)
- C- Keuther, Amanda (MD)
- D- Cornwell, Minnie (PR)

**New Admits**

- Fink, James 201-C PR
- Ginghold, Fiona 135-B BCBS
- Winzig, Walter 136-A MD

**Discharges**

- Lichnowski, Mag... 202-B MA
- Tutti, Carlo 210-A MP

**Bed Holds**

- Hillary, Mason M. 121-A Leave
- Johnson, Wilma 113-B Hosp
- Taylor, Melissa 101-B Hold

**Location Changes**

- Saint Saen, Evelyn... 113-C to 118-A
- Weissman, Gerta 101-A to 200-B

**Payor Changes**

- Beethoven, Mark MA to MD
- Bundy, Mattie MA to MA

**Referrals**

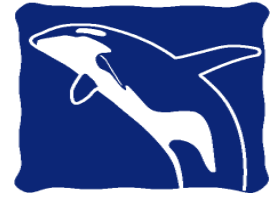
- Gingold, Hermoine MA UND to MA RUC

**Medicare**

- Bundy, Mattie 136-B RVC
- Marshall, Alice 125-A SSB
- Catanach, Mathilde 122-B SE3
- Nelson, Hulda 130-C CC1
- Reiersen, Astrid 122-A UND

Occupied: 67 Bed hold: 10 Available: 4 Capacity: 83 Medicare: 10 Medicaid skilled: 51 Skilled: 82% Occupied: 90%

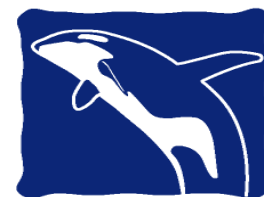
# E-Assessments



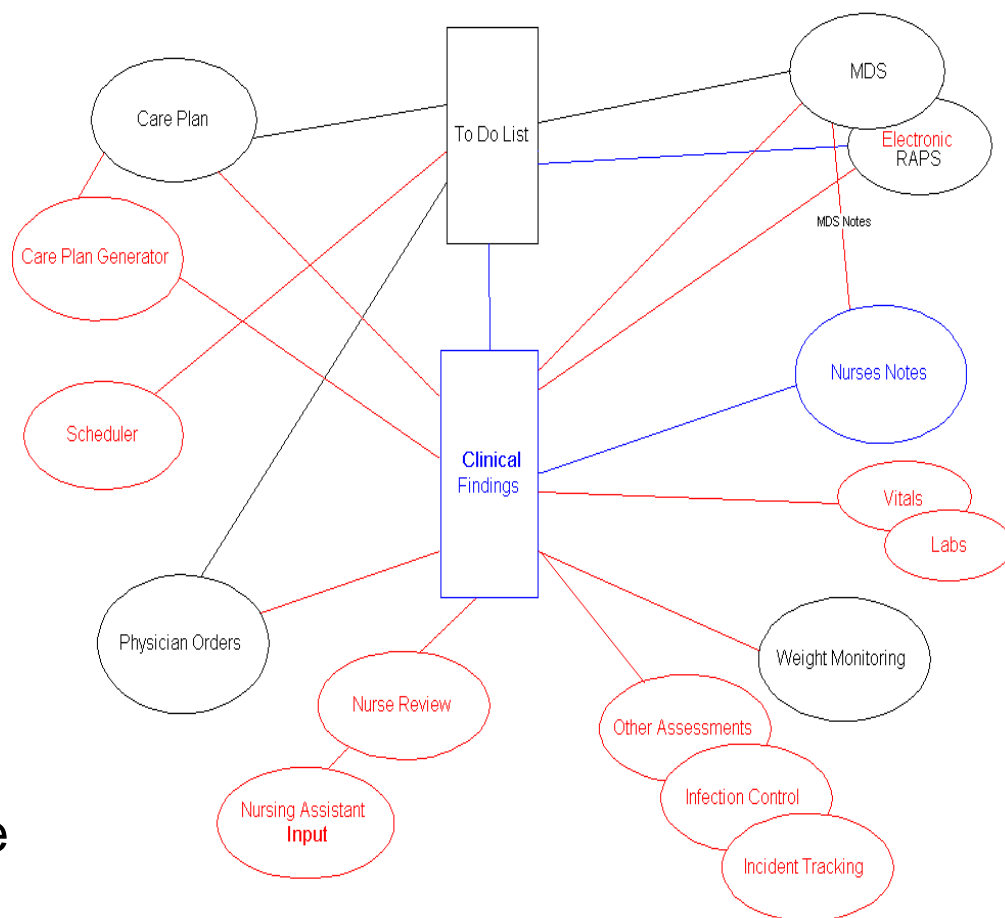
- User-defined assessments developed in parallel with MDS 3.0
  - E-signatures to lock assessment
  - Shared questions between assessments
  - MDS questions secured but available to share with other assessments
  - Ability to schedule UDA's
  - To Do's for schedule reminders
  - Ability to view from Progress notes

# Clinical Findings – Overview

## (Post MDS 3.0)



- Resident conditions grouped by categories
- Trigger 'To Do's' to assure timely interventions
- Triggered from multiple sources
- Shared throughout medical record to assure consistency
- Tracked until resolved
- Resolved by automatic system actions or manual notation
- System generated CF can be accepted or rejected with rationale



# Progress Notes with Clinical Findings



- Enter general notes or notes for Clinical Findings
- Track Findings until resolved
- Set-up options for required documentation associated to a Finding
- Sort Findings by category or due date
- Sort notes by Findings
- RVMF for new and resolved Findings
- To Do's generated for:
  - ☐ Updating care plan for new/resolved Clinical Findings

Face Sheet   Chart   Census

**Gerta D. Weissman** 0000027-1 **113-B**  
 Private Payor  
 Admitted 09/14/2002 Emergency contact: Harry Weissman (402) 329-1082  
 CPR Allergies: NKA Physician: Dr. Bob Friedman (402) 834-2312

**Progress Notes** Nursing Alerts:

Show all notes for last 30 days Generate

Date ▲	Note Type ▼	Finding ▼	Note ▼	By ▼
09/10/03	Routine	Chest pain after meals	Resolved finding on 9/10/03: Cardiovascular: Chest pain after meals. This is the text of the note Rhonda wrote about Gerta's chest pain this is the text of the note Rhonda wrote about Gerta's chest pain this is the	Rhonda Wilson RN
09/11/03	Incident	Verbally inappropriate behavior	New finding on 9/11/03: This is the text of the note Sally wrote when Gerta screamed at her and then she wrote some more, this is the text of the note Sally wrote when Gerta screamed at her and then she wrote	Sally Nelson LPN
09/15/03	Routine	5% weight loss in 30 days	New finding on 9/15/03: This is the text of the note about weight loss Rhonda wrote for Gerta this is the text of the weight loss note Rhonda wrote for Gerta this is the text of the weight loss note Rhonda wrote for	Rhonda Wilson RN
09/16/03	Routine	Fall	This is the text of the note Rhonda wrote for Gerta yesterday, this is the text as it was continued by Rhonda when she wrote yesterday's progress note this is the text as it was continued by Rhonda when she...	Rhonda Wilson RN

Note date/time: 09/17/2003 9:16 AM

☐ General note  
☐ Add new clinical finding

(Category) (Clinical Finding) (Due)

☒ Note on selected findings

Show clinical findings in the category: Cardiovascular

Category ▲	Clinical Finding ▼	Due ▼
<input checked="" type="checkbox"/> Cardiovascular	Chest pain after meals	09/17/03
<input checked="" type="checkbox"/> Cardiovascular	Irregular heart rhythm	09/20/03
<input type="checkbox"/> Activities	Little involvement in activities	09/25/03
<input type="checkbox"/> Advanced dir...	Advanced directives	10/25/03
<input type="checkbox"/> Cognitive	Forgetful	09/19/03
<input type="checkbox"/> Cognitive	Long-term memory problem	11/24/03
<input type="checkbox"/> Falls	Fall	09/17/03
<input type="checkbox"/> Neurological	Fainting spells	09/17/03
<input type="checkbox"/> Oral / dental	5% weight loss in last 30 d...	09/17/03

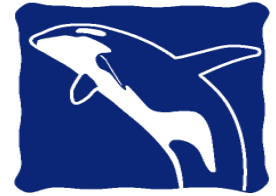
☒ Select all matching 2 selected clinical findings

Note type: Routine

Post This Note Finish Later Cancel

# Clinical Findings

*To be revised for MDS 3.0*



- User set-up to add additional categories, Findings
- Assign responsible disciplines to CF
- User set-up to optionally require family and/or physician notification
- Ability to assign required clinical interventions (actions) and frequency
- Activate or inactivate CF at facility level

**Clinical Setup**

**Clinical Findings Setup**

Show categories and clinical findings containing:  Find All 612 clinical findings

Category ▲	Clinical Finding ▼	Discipline ▼	Notify Family ▼	Notify Dr. ▼
<input checked="" type="checkbox"/> ADL	Shaving total assist	LN	No	No
<input checked="" type="checkbox"/> ADL	Slide board transfer aid	LN	No	No
<input checked="" type="checkbox"/> ADL	Splint or brace assistance	OT	No	No
<input checked="" type="checkbox"/> ADL	Transfer training or practice	PT	No	No
<input checked="" type="checkbox"/> ADL	Trapeze transfer aid	LN	No	No
<input checked="" type="checkbox"/> ADL	Walker transfer aid	LN	No	No
<input checked="" type="checkbox"/> ADL	Walking training or practice	PT	No	No
<input checked="" type="checkbox"/> Admission	Admission	LN	No	No
<input checked="" type="checkbox"/> Advanced directives	Advanced directives	SS	No	No
<input checked="" type="checkbox"/> Allergies	Allergies - food	LN	No	No
<input checked="" type="checkbox"/> Allergies	Allergies - medication	LN	No	No
<input checked="" type="checkbox"/> Allergies	Allergies - other	LN	No	No
<input checked="" type="checkbox"/> Cardiovascular	Apical pulse above 100	LN	No	Yes
<input checked="" type="checkbox"/> Cardiovascular	Apical pulse below 60	LN	No	Yes
<input checked="" type="checkbox"/> Cardiovascular	Arteriosclerotic heart disease (ASHD)	LN	No	No
<input checked="" type="checkbox"/> Cardiovascular	Cardiac dysrhythmia	LN	No	Yes
<input checked="" type="checkbox"/> Cardiovascular	Chest pain after meals	D, LN, LN	Yes	Yes
<input checked="" type="checkbox"/> Cardiovascular	Chest pain nocturnal	LN	Yes	Yes
<input checked="" type="checkbox"/> Cardiovascular	Chest pain with activity	LN	Yes	Yes
<input checked="" type="checkbox"/> Cardiovascular	Congestive heart failure	LN	No	No
<input checked="" type="checkbox"/> Cardiovascular	Deep vein thrombosis	LN	No	No

Category: Cardiovascular ☒ Active

Clinical finding: Chest pain after meals

Discipline ▲	Action ▼	To Do ▼	Frequency ▼
Dietary	Document	To Do	Daily
Licensed Nurse	Pain Assessment	To Do	Daily
Licensed N...	Vitals	None	Every shift
(add new row)			

Notify family: Yes  
 Notify physician: Yes

Update Cancel

# Let's look at an actual clinical finding...Pain



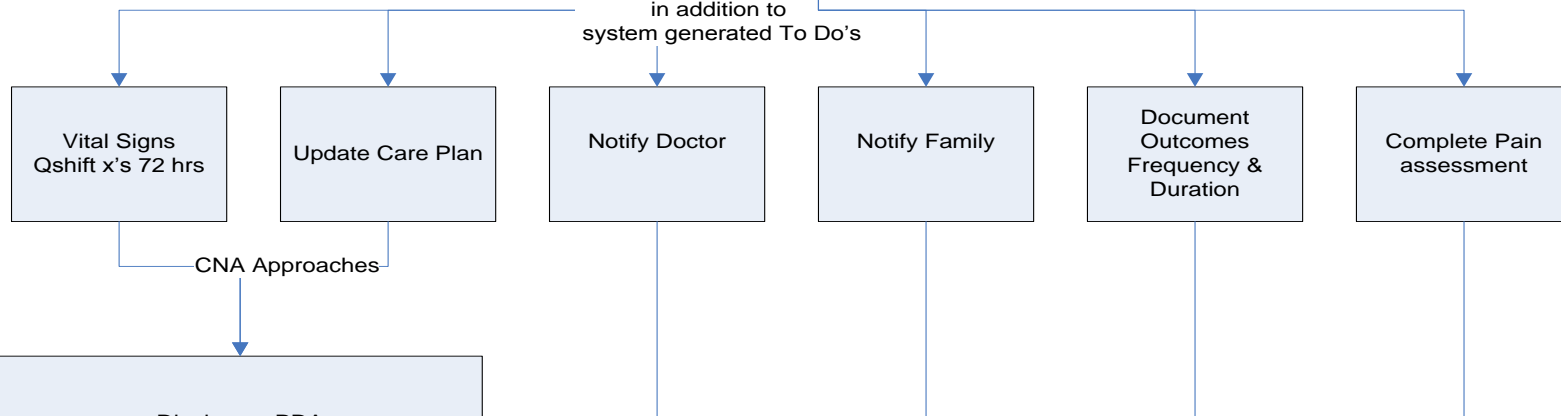
*Pain can be identified from many sources*



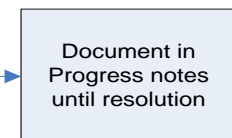
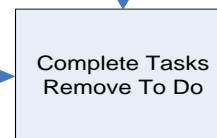
*Required activities are triggered by To Do's*



User created in set-up in addition to system generated To Do's



*Once pain is identified it triggers To Do's and they display until completed*





# Chart2Go — *Electronic CNA Documentation*

## What Does It Do?

### ■ Collect CNA Documentation At Point of Service

- ☐ Weights
- ☐ Vitals
- ☐ Meal Intake
- ☐ I&O
- ☐ Restorative Minutes
- ☐ ADL's/Elimination/Bathing/Mood/Cognition
  - 85 questions optional data elements
- ☐ CNA Approaches from Care Plan
- ☐ Auto update Orcas database for instant
- ☐ Analysis
- ☐ Exceptions
- ☐ Omissions
- ☐ Reporting
- ☐ MDS Supporting Documentation

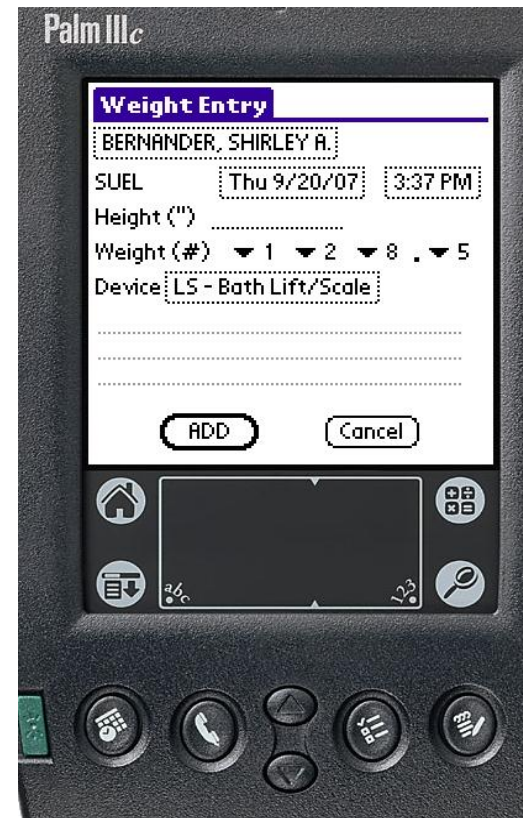
### ■ Results in Improved Clinical and Financial Outcomes



# Chart2Go — *Electronic CNA Documentation*

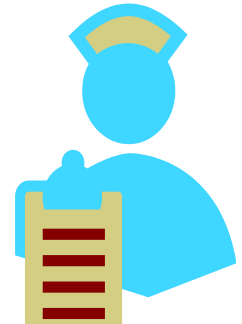
Why should I use it?

- Increase your case mix reimbursement through better ADL management.
- Point-of-care data collection for ADL's, weights, vitals, meal intake, nourishments and I&O.
- Labor efficiencies – eliminate duplication of effort & manual data entry from paper.
- Avoid Omitted Documentation
- Instant exception report for abnormalities
- Avoid inconsistencies with supporting documentation
- Paperless, electronic charting





# Schedule CNA Tasks...



Easy as 1 – 2 – 3:

1. **Select a Resident**
2. **Select Schedule button**
3. **One click to change vitals from monthly to shiftly**
4. **Schedule displays on the PDA**

**Gerta Weissman** 100101-2 102-1

Admitted 02/01/2001  
**CPR** Allergies: Penicillin Sulfonamide  
 Emergency contact: Mary Her... (360) 456-7891  
 Physician: Dr. Bryce D. Ander... (234) 756-9875

Vitals  
 Temperature: 101.9 03/02/2002 Pulse: 83 02/19/2001 Respiration: 14 02/19/2001  
 Blood pressure: 110/77 02/19/2001 Blood sugar: 137 03/02/2001 02 Saturation: 96% 02/19/2001

Show all vitals for selected dates from 02/07/2002 thru 03/08/2002

Date	Time	Shift	Vital	Value	Taken by	Signature	Note
02/19/2001	10:23 AM	Day	Pulse	83 bpm	Carla Olivares, CNA	Rhonda Wilson, N...	
02/19/2001	12:55 PM	Day	Blood pressure	110/77 mmHg	Rhonda Wilson, N...	Rhonda Wilson, N...	
03/02/2001	12:55 PM	Day	Temperature	101.9 °F	Carla Olivares, CNA	Rhonda Wilson, N...	
03/02/2001	12:55 PM	Day	Blood sugar	137 mg/dL	Rhonda Wilson, N...	Rhonda Wilson, N...	

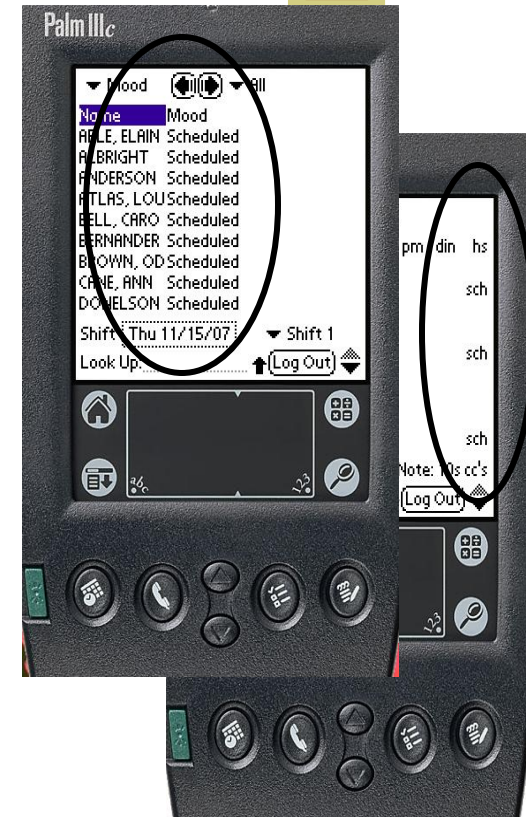
Date: 11/25/2002 Time: 1:50 PM Shift: Day

**Edit Schedule**  
 Schedule for: Weissman, Gerta 1105-1 101-B

Type	Item	Schedule
Assessment sections	All sections	QS (every shift)
Meals	AM snack	QD (every day, 10:30...)
Meals	Breakfast	QD (every day, 8:30...)
Vitals	Temperature, Pulse, Resp...	QD (every day, eveni...)
Weights	Weights	QD (every month)
Weights	Weights	QD (every day)

Determine how to sch for admit

Update Cancel



**Orcas**<sup>TM</sup>  
 Clinical / Financial Suite

# Instant Exception Reporting

After hot sync'ing, the data is stored in Orcas for validation, edits (if necessary) and instant view for exceptions:

Show statements for residents with:

- Omitted documentation
- Abnormal vitals (High/Low/Both)
- Weight Loss/Gain/Both
- Meal intake less than 50% for any meal today (or any other %)
- Fluid intake less than 800 cc's (or any other threshold)
- Potential Change in Status (Significant or otherwise)



**Orcas - Sue Lewis - Waldron Health Care 9/20/2007**

**Filter** | Planner | Back | Forward | Reports | Print | Admit | Clinical | Financial | Setup | Internet | Assistance | Facility

**Face Sheet | Chart | Account | Census | Resident Trust | Policy**

**Margaret L. DeBoer 05W0011-1** **107-D**  
 Private (C-PR, MB, MA)  
 Readmitted 10/25/2006 [Emergency contact](#) Carl T. DeBoer (366) 660-5566  
 DNR Allergies: NKA Physician: Dr. Mark M. Lacinder (360) 299-8877

**MDS** Nursing Alerts:

Show **Medicare RUG** scores.

Date	Assessment	Medicare RUG	Status	...
01/16/2006	Admission	CA109	Complete	3
04/11/2006	1st quarterly	CA109	Complete	3
07/08/2006	2nd quarterly	CA109	Complete	3
10/03/2006	3rd quarterly	CA109	Complete	3
10/22/2006	Discharged (return anticipated)		Complete	3
10/25/2006	Reentry		Complete	3
12/03/2006	Annual	CA109	Complete	3
02/27/2007	1st quarterly	CA109	Complete	3

(add new row)

Open drawer to inactivate/modify this assessment.

RAI AA B C D E F G H I J K L M N O P Q R W

# MDS Management using Chart2Go



- Create the MDS in Orcas
- To create the MDS requires an ARD date
- The ARD date should:
  - ☐ Reflect the best RUG Score

Chart2Go provides ADL scores for a 7-day floating ARD – just select the best day...



- MDS scoring should:
  - ☐ Be consistent with supporting documentation

Chart2Go provides the MDS Score Report to display the appropriate scores for the CNA collected data elements based on the selected ARD date auto calculated for the look back period...



Jan, MDS Coordinator

# MDS Consistency with CNA Collected Data

- CNA shiftily collected data is analyzed for the MDS ARD look-back period
- The recommended score is presented via the CNA button
  - Don't let your MDS and CNA documentation differ!!
  - If it does differ provide a note in the chart explaining it.
  - Improve ADL & RUG scores



Nursing Alerts:

Section B. Cognitive Patterns **None of Above - Medicar**

**COMATOSE**  
● RUG ● QI

(Persistent vegetative state/no discernible consciousness)  
(If yes, skip to Section G)  
0. No

**MEMORY**  
(Recall of what was learned or known)

a. Short-term memory OK—seems/appears to recall after 5 minute:  
● CIAA ● RAP ● RUG ● QI  
Memory OK

b. Long-term memory OK—seems/appears to recall long past ● R  
1. Memory problem

**MEMORY/RECALL ABILITY**

**COGNITIVE SKILLS FOR DAILY DECISION MAKING**  
● CIAA ● RAP ● RUG ● QI

**INDICATORS OF DELIRIUM—**

(Code for behavior in the last 7 days.) (Note: Accurate assessment from conversations with staff and family who have direct knowledge of r

**Review CNA Documentation**

B2a Short-term memory OK-seems/appears to recall after 5 minutes  
Recommended score: 1. Memory problem

CNA Documentation From: 01/09/2008 Thru: 01/15/2008 ARD: 01/15/2008

Date	Shift	Response	Defer	Documented By	Signature	Note	Rev

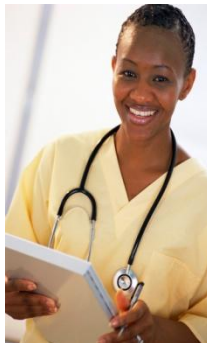
(add new row)

OK Cancel

AA AB A B C D E G H I J K M N O P Q R T

# Facility Report Card

- Monitor facility average CMI and ADL scores over 12 months
- Increase should be evident the first month with Chart2Go but noticeably so after 90 days.



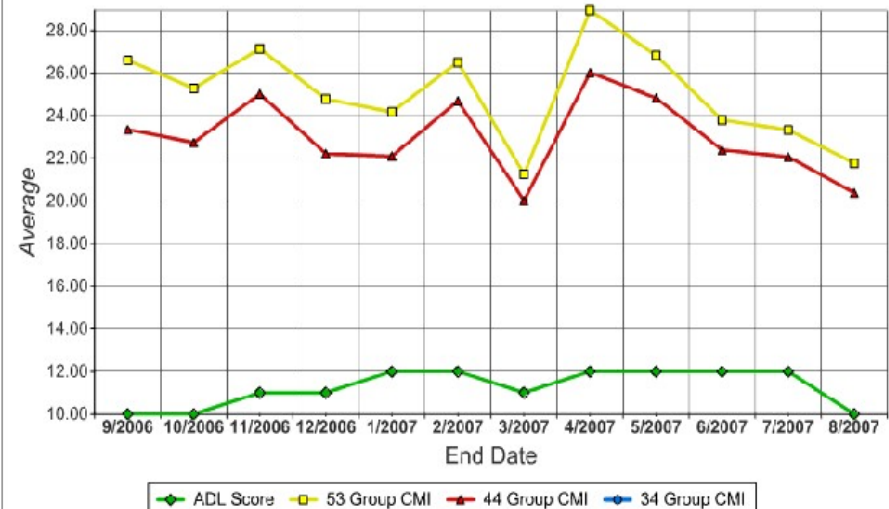
**Pro-Tracking**  
Clinical Outcomes Management

**Demo Home XXXX**  
**RUG CMI/ADL Summary Report**  
**Report Date: 9/21/2007**

**CONFIDENTIAL:** PRIVILEGED QUALITY ASSESSMENT AND ASSURANCE COMMITTEE RECORDS UNDER MEDICARE AND MEDICAID STATUTES, 42 U.S.C. 1395I-3(b)(1)(B) AND 1396r(b)(1)(B). CONFIDENTIAL COMMERCIAL OR FINANCIAL INFORMATION NOT SUBJECT TO PUBLIC DISCLOSURE UNDER 5 U.S.C. 552b AND 45 C.F.R. SUBTITLE A, PART 5 (EXEMPTION 4).

Calculation	Monthly Average											
	9 2006	10 2006	11 2006	12 2006	1 2007	2 2007	3 2007	4 2007	5 2007	6 2007	7 2007	8 2007
ADL Score	10	10	11	11	12	12	11	12	12	12	12	10
53 Group CMI	26.6	25.28	27.15	24.78	24.17	26.51	21.26	28.94	26.83	23.8	23.33	21.77
44 Group CMI	23.35	22.74	25.02	22.22	22.1	24.69	20.02	26.02	24.83	22.39	22.07	20.38
34 Group CMI	1.2	1.17	1.23	1.12	1.17	1.17	1.01	1.23	1.23	1.1	1.12	1.03

Demo Home XXXX  
Monthly Average Scores



# Clinical Outcomes Management

- Gauge effectiveness of your therapy programs
- Informed decisions regarding continuation of Therapy
- Part B Therapy by discipline (PT, OT, ST)
  - Improvements in care
  - Decline in care

*Hundreds of other outcome, survey and facility population analysis reports*

Pro-Tracking.com - Part B Physical Therapy Screen Report - Windows Internet Explorer

https://www.pro-tracking.com/secure/facility/reports/rpt\_fac\_part\_b\_therapy\_run.asp?screenType=PT&BD=3%2F1%2F2008&ED=3%2F30%2F2009

Select the discipline: Physical Therapy

Enter Start date: (eg: 1/1/2008) 3/1/2009

Enter End date: (eg: 12/31/2008) 3/30/2009

GO

View as CSV file

Click on a Resident's Name to View Details  
Click on a Flag to View Details About the Change

Resident Name	Nursing Station	Room	Assessment Date	Condition Decline	Condition Improvement	Screen?
XXXXXXXXXX, GXXXXXXXXX	East	432-B	3/28/2009	🚩	🟢	Yes
XXXXXXXXXX, GXXXXXXXXX	South	425-B	3/24/2009	🚩	🟢	?
XXXXXXXXXX, TXXXXXXXXX	East	409-A	3/13/2009		🟢	?
BXXXXXXXXX, BXXXXXXXXX	East	414-A	3/16/2009	🚩	🟢	?
BXXXXXXXXX, HXXXXXXXXX	East	424-B	3/9/2009	🚩	🟢	?
BXXXXXXXXX, DXXXXXXXXX	West	306-A	3/30/2009	🚩	🟢	?
BXXXXXXXXX, PXXXXXXXXX	West	50-A	3/2/2009	🚩	🟢	?
CXXXXXXXXX, DXXXXXXXXX	East	412-B	3/10/2009	🚩	🟢	?
CXXXXXXXXX, MXXXXXXXXX	East	406-B	3/5/2009	🚩	🟢	?
CXXXXXXXXX, NXXXXXXXXX	East	405-A	3/16/2009	🚩	🟢	?
CXXXXXXXXX, RXXXXXXXXX	West	327-A	3/20/2009	🚩	🟢	?
EXXXXXXXXX, DXXXXXXXXX	East	42-B	3/4/2009	🚩	🟢	?
EXXXXXXXXX, RXXXXXXXXX	East	421-P	3/11/2009		🟢	?
FXXXXXXXXX, AXXXXXXXXX	West	315-A	3/7/2009	🚩	🟢	?
GXXXXXXXXX, JXXXXXXXXX	West	301-B	3/18/2009	🚩	🟢	?

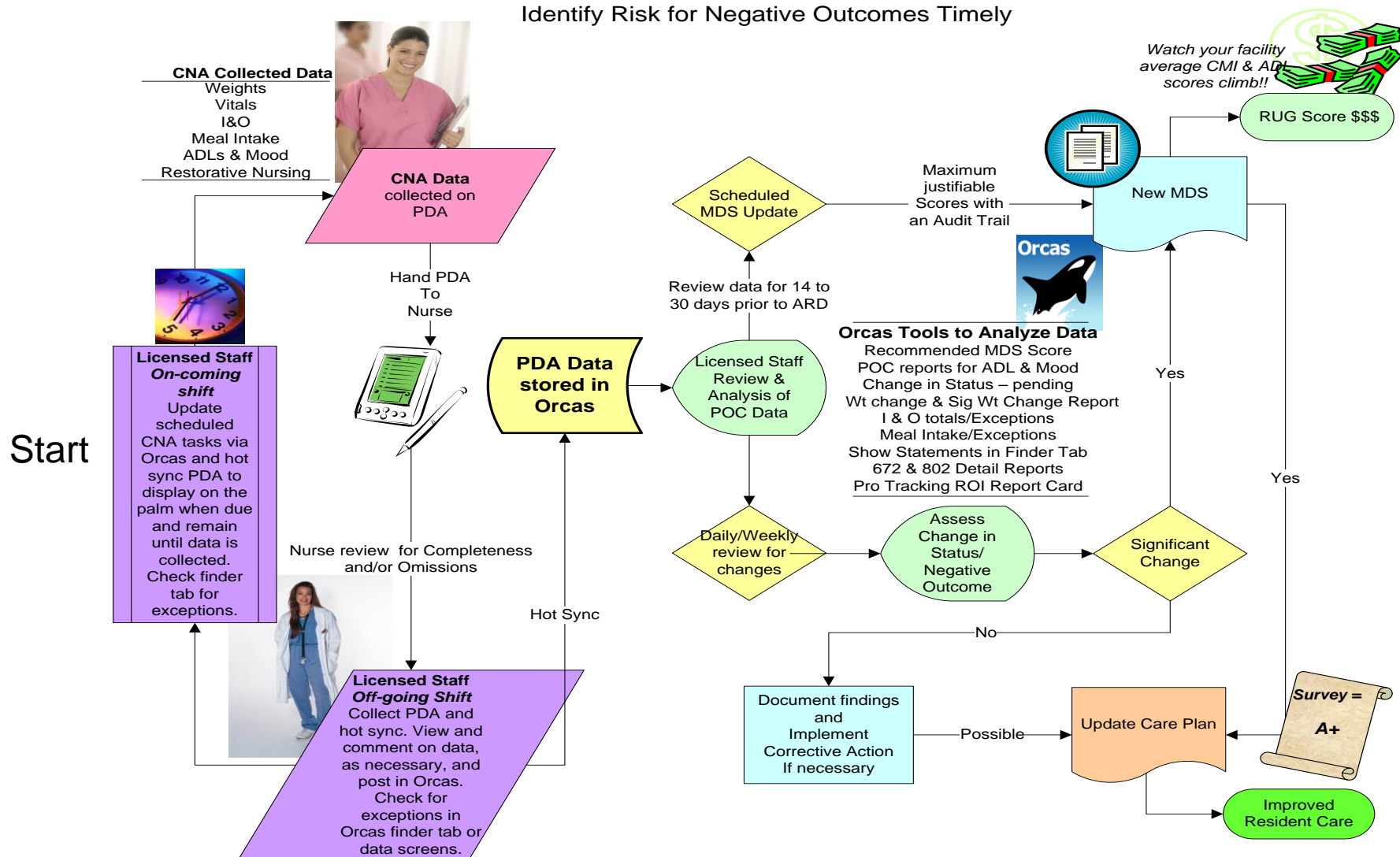
Click on flag to view detail





# To Sum It Up....

Licensed Staff Evaluation of POC Data  
Maximize Justifiable Reimbursement  
Identify Risk for Negative Outcomes Timely



# Questions?



Contact Accu-Med Services  
800-777-9141



**Accu-Med Services**  
An Omnicare Company